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PTO/SB/21 (09-05)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number 10/817,278

Filing Date April 2, 2004

First Named Inventor Joseph Spadola Jr.

Art Unit 3748

Examiner Name not assigned

Attorney Docket Number MAVEN-0008

**ENCLOSURES (Check all that apply)**

- ☐ Fee Transmittal Form  
☐ Fee Attached  
☐ Amendment/Reply  
☐ After Final  
☐ Affidavits/declaration(s)  
☐ Extension of Time Request  
☐ Express Abandonment Request  
☐ Information Disclosure Statement  
☐ Certified Copy of Priority Document(s)  
☐ Reply to Missing Parts/  
Incomplete Application  
☐ Reply to Missing Parts  
under 37 CFR 1.52 or 1.53

- ☐ Drawing(s)  
☐ Licensing-related Papers  
☐ Petition  
☐ Petition to Convert to a  
Provisional Application  
☒ Power of Attorney, Revocation  
Change of Correspondence Address  
☐ Terminal Disclaimer  
☐ Request for Refund  
☐ CD, Number of CD(s) \_\_\_\_\_  
☐ Landscape Table on CD

- ☐ After Allowance Communication to TC  
☐ Appeal Communication to Board  
of Appeals and Interferences  
☐ Appeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)  
☐ Proprietary Information  
☐ Status Letter  
☐ Other Enclosure(s) (please identify  
below):

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name Law Office of Michael A. Blake

Signature

Printed name Michael A. Blake

Date December 4, 2006

Reg. No.

42,333

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Typed or printed name Michael A. Blake

Date

December 4, 2006

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P.02

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NOV-26-2006 11:04

**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number: 10/817,276  
Filing Date: 04/02/2006  
First Named Inventor: Joseph Spadato Jr.  
Title: Computer Monitoring System for Pump  
Art Unit: 3746  
Examiner Name: Unknown  
Priority/Sequel Number: N/A

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioner associated with the Customer Number:

50010

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ Firm or Individual Name

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State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is required. (Form PTO/SB/80)

SIGNATURE of Applicant or Assignee of Record

Signature: *Anthony P. P...*

Date

11/29/06

Name: Anthony P. P...

Telephone

(732) 240-2388

Title and Company

NOTE: Signatures of all the inventor or assignee of record of the entire interest in their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☒ Total of 3 forms are submitted.

This application of information is required by 37 CFR 1.31, 1.52 and 1.53. The information is required to establish or retain a record by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This application is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1600, Alexandria, VA 22313-1400. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1600, Alexandria, VA 22313-1400.

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PAGE 02

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PTO/SB/01 (01-03)

Approved for use through 12/31/2004, OMB 0331-0002

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Applicant Name	18-217-278
Filing Date	04/02/2014
Applicant Address	Joseph Spadola Jr.
Title	Computer Monitoring System for Pump
Art Unit	3742
Examiner Name	William
Attorney District Number	MAVEN-0003

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioner associated with the Customer Number:

50310

OR

☐ Practitioner(s) listed below:

Name	Registration Number

to my/our attorney(s) or agent(s) to prosecute the application identified above, and to prosecute all business in the United States Patent and Trademark Office connected therewith.

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Address

City

State

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Telephone

Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/02)

SIGNATURE of Applicant or Assignee of Record

Signature

Date

Name

Joseph Spadola Jr.

Telephone

204-000-0103

Title and Company

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. (37 CFR 3.71)

☒ Total of 3 forms to be submitted.

This statement of information is required by 37 CFR 1.01, 1.02, and 1.03. The information is required to be on or retain a record by the public which is to be used by the USPTO in processing an application. Confidentiality is covered by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This statement is submitted to the USPTO to complete, including gathering, processing, and submitting the information to the USPTO. There will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or assignee(s) or reducing this burden, should be sent to the Office Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND PAGES OF COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/01 (01-06)

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CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/817,278
Filing Date	04/02/2004
First Named Inventor	Joseph Spadola Jr.
Title	Computer Monitoring System for Pump
Art Unit	3748
Examiner Name	unknown
Attorney Docket Number	MAVEN-0006

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

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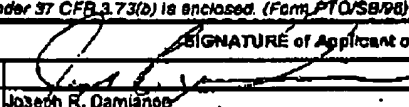
<input type="checkbox"/> Firm or Individual Name			
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/08)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	Nov. 26, 2006
Name	Joseph R. Damianop	Telephone	201-444-5872
Title and Company	V.P. Marketing		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 123 and 37 CFR 1.10 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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